

PART B—ISSUE FEE TRANSMITTAL

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Tammy T. Fattoross (Depositor's name)

Tammy T. Fattoross (Signature)

3/3/00 (Date)

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|--|-------------------------|---------------------|--|-------------------------|
| APPLICATION NO. 09/120,422 | FILING DATE 07/22/98 | TOTAL CLAIMS 009 | EXAMINER AND GROUP ART UNIT MAH, C 3626 | DATE MAILED 01/05/00 |
| First Named Applicant: SANTELLI, 35 USC 154(b) term ext. = 0 Days. | | | | |

TITLE OF INVENTION: PLASTIC EXTRUSION HAVING UNITARY THERMOPLASTIC RUBBER AND THERMOPLASTIC SECTIONS (AS AMENDED)

| | | | | | | |
|-----------------------------------|-------------------------------|------------------|------------------------|---------------------|---------------------|----------------------|
| ATTY'S DOCKET NO. 3 4297-10405 | CLASS-SUBCLASS 016-225.000 | BATCH NO. G59 | APPLN. TYPE UTILITY | SMALL ENTITY YES | FEE DUE \$605.00 | DATE DUE 04/05/00 |
|-----------------------------------|-------------------------------|------------------|------------------------|---------------------|---------------------|----------------------|

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Paul A. Schwarz;
 Buchanan Ingersoll

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee
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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *[Signature]* (Date) 3/3/00
 NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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 01 FC:242
 02 FC:361

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